

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CH</i>	10001	10/23/68
O.I.P.E. CLASSIFIER		49	10/23/68
FORMALITY REVIEW	<i>CH</i>	JC 900	10/23/68
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

BEST AVAIL

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	11/06/68
Original	12/12/68
1	✓ ✓ ✓
2	✓ ✓ ✓
3	✓ ✓ ✓
4	✓ ✓ ✓
5	✓ ✓ ✓
6	✓ ✓ ✓
7	✓ ✓ ✓
8	✓ ✓ ✓
9	✓ ✓ ✓
10	✓ ✓ ✓
11	✓ ✓ ✓
12	✓ ✓ ✓
13	✓ ✓ ✓
14	✓ ✓ 0
15	✓ ✓ ✓
16	✓ ✓ ✓
17	✓ ✓ ✓
18	✓ ✓ ✓
19	✓ ✓ ✓
20	✓ ✓ ✓
21	✓ ✓ ✓
22	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here